

Commonwealth Coordinated Care Plus (CCC Plus) Medicaid Managed Care Pharmacy Update October 18, 2017

Beginning August 1, 2017, DMAS launched the CCC Plus Managed Care program for full Medicaid members who are either 65 or older, children or adults with disabilities, nursing facility residents, and those receiving services and supports through a home and community based waiver. CCC Plus is currently effective in the Tidewater, Central and Charlottesville/Western Regions. Roanoke/Alleghany and Southwest begin Nov 1, 2017. Northern VA and Winchester begin Dec 1, 2017. Medicaid mails an enrollment letter and program information to eligible members. The new CCC Plus program provides medical, behavioral health, substance use disorder, pharmacy services and long term services and supports services— all under one program. The program includes the additional benefit of a care coordinator assigned to each member. Detailed information on CCC Plus population of over 216,000 members, services, and regional implementation schedule is available on the CCC Plus webpage.

Six Health Plans are participating in CCC Plus. Providers may contact Health Plan Provider Relations department to initiate a conversation about joining a network. See the <u>Contracting and Credentialing</u> <u>Contact Information</u> for the participating health plans.

CCC Plus Health Plans

Aetna Better Healthhttps://www.aetnabetterhealth.com/virginiaAnthem HealthKeepers Plushttps://mss.anthem.com/va/Pages/aboutus.aspx

Magellan Complete Care of VA http://www.mccofva.com/

Optima Health Community Care https://www.optimahealth.com/communitycare/Pages/default.aspx

UnitedHealthcare Community Plan http://www.uhccommunityplan.com/

Virginia Premier Health Plan https://www.vapremier.com/

DMAS and the health plans developed several tools to assist pharmacists with the transition to CCC Plus. Please visit the CCC Plus Pharmacy webpage to find information on how to bill each of the health plans.



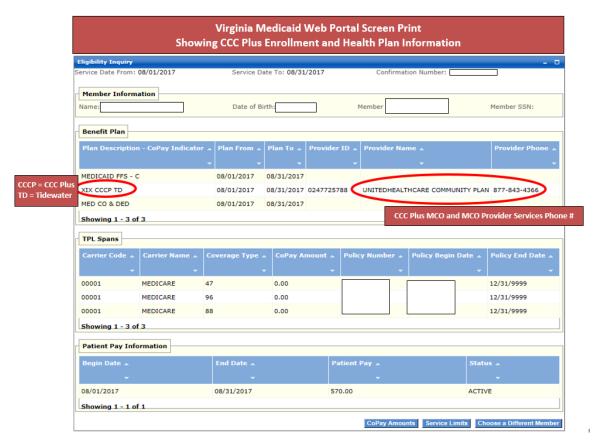
| CCC Plus Health Plan & PBM Help Desk Phone Number | RxBIN | RxPCN | Group |
|---|--------|----------|---------|
| Aetna Better Health of VA 1-866-386-7882 | 610591 | ADV | RX8837 |
| Anthem HealthKeepers 1-855-323-4687 | 003858 | A4 | WQWA |
| United Healthcare 1-855-873-3493 | 610494 | 4444 | ACUVA |
| Magellan Complete Care 1-800-424-4524 | 016523 | 62282 | VAMLTSS |
| Optima Family Care 1-866-244-9113 | 610011 | OHPMCAID | n/a |
| VA Premier 1-855-872-0005 | 009893 | ROIRX | n/a |

Medicaid Eligibility and CCC Plus Enrollment

- ✓ Verification of a member's participation in CCC Plus can be done through the DMAS MediCall audio response system (1-800-884-9730 or 1-800-772-9996) or the DMAS webbased internet option, available on the <u>Virginia Medicaid Web Portal</u>. As members are assigned to a CCC Plus health plan, the status of the enrollment is reflected in the DMAS member eligibility information data available on the 21st of every month for the first of the following month.
- ✓ CCC Plans health plans can process claims under either the member's Medicaid ID or the health plan ID number. *Pharmacies must use the member's Medicare ID number when submitting Medicare Part D claims*.
- ✓ If your claim is submitted as a Fee-For-Service claim and is denied by Magellan because the member is now enrolled in a CCC Plus plan, Magellan will return the name of the member's MCO, BIN, PCN and pharmacy helpdesk number, should you need to contact that plan to resolve member identification or eligibility issues. Claims for Virginia Medicaid members enrolled in managed care programs must be billed to the member's MCO. *Pharmacies must use the member's Medicare ID number when submitting Medicare Part D claims*.
- ✓ All items previously covered under Fee-For-Service Medicaid are covered in CCC Plus. If you are getting a reject on an item that was previously covered and cannot get the claim to process, you can call the MCO's Pharmacy Helpdesk on behalf of the member. *Please note that Medical supplies associated with the administration of insulin, (e.g., alcohol wipes and syringes) must be paid for under Part D, using the member's Medicare ID number.*



✓ If needed, a 72-hour emergency supply of a prescribed covered pharmacy service may be dispensed if the prescriber cannot readily provide authorization and the pharmacist, in his/her professional judgement consistent with the current standards of practice, believes that the Member's health would be compromised without the benefit of the drug.



CCC Plus Care Coordinator

If you or the member have questions or concerns, please use the following Care Coordination Phone line to get in touch with a Member's Care Coordinator.

| CCC Plus Care Coordination | | | | | | |
|----------------------------|----------------|--------------|-----------------|-------------------|------------------------|--|
| Aetna | Anthem | Magellan | Optima | United HealthCare | VA Premier | |
| 1-855-652-8249 | 1-855-323-4687 | 866-622-7982 | 757-552-8398 OR | 877-843-4366 | 1-877-719-7358 | |
| press #1 and ask for | Press #4 | | Toll Free | | Select option for Care | |
| Care Coordinator | | | 866-546-7924 | | Management | |

If you have questions or concerns about CCC Plus for the Department of Medical Assistance Services, please email the CCC Plus inbox, <u>cccplus@dmas.virginia.gov</u> for assistance.